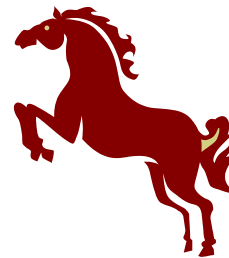


Flathead County 4-H Horse Camp

April 29, 30 & May 1, 2016
Flathead County Fairgrounds



Dear 4-H Parents & Members:

This year is our 9th Annual Flathead County 4-H Horse Camp. Enclosed is the registration packet. This event is for prior 4-H members and other youth who would like to attend. Please read through the packet carefully and feel free to contact the Extension Office if you have any questions at 758-5553.

Registrations are due to the Extension Office no later than **Tuesday, April 12, 2016**. Early bird registration runs now through April 4, 2016 and will be \$62.00 per 4-H member and \$87 per non-member. A registration fee of \$72.00 will be charged after April 4th; \$97 for non-members. If there are multiple participants attending camp from the same household, a "household discount" of \$10 per member will be allowed.

A t-shirt and all meals are included with registration. **There are no price breaks for partial attendance** and \$10.00 of your registration fee is non-refundable. A silent auction and other camp merchandise including baseball hats and pull-over jackets will be available during camp. Please bring funds if you choose to purchase items at camp.

A limited number of partial scholarships in the amount of \$30 for camp registration fees may be available upon written scholarship requests. Requests may be turned in to the Extension Office with your registration packet. You will be notified of acceptance or denial within a few days of submitting your request.

Stall fees of \$8.00 per stall will be charged; however, \$5.00 will be refunded at the end of camp if the stall is clean.

- * Fee includes one bag shavings. Additional bags available for \$5.00 each or can be donated back to Horse Camp fund.
- * No Stallions are allowed at camp.
- * Advanced horsemanship members may consider bringing a young horse to camp for experience.
 - It is recommended that they bring a riding horse as well.
- * Members are responsible for caring for their own animal. Chaperones may assist.
- * Members must strip their stall before they leave.
- * Fresh water must be in front of your horse when they are in a stall.
- * Members must be in control of your horse at all times. Do not bring a horse to camp that you cannot control.
- * Parents and relatives are there to observe and chaperone, not participate. Adult class will be offered.
- * Non-participating siblings will be under the supervision of an adult.
- * Visitors are welcome to attend. Meals must be pre-ordered and cost \$5 per meal.
- * Members should bring the horse that they have identified as their project animal.

Members are required to have a chaperone present during clinic hours. These hours are Friday, April 29, 2016 from 4:00pm-9:30pm, Saturday, April 30, 2016 from 8:30am-9:00pm, and on Sunday May 1, 2016 from 8:30am-4:00pm. Chaperones are charged a fee of \$35.00 for a t-shirt and meals, which includes Friday's dinner, three meals on Saturday, and two meals and a snack on Sunday. A schedule of events is attached to this packet. Members who are unable to tack-up their own horse will require a chaperone's help. A chaperone may be responsible for up to no more than 5 campers. Overnight chaperones are encouraged. Forms will not be accepted for members who do not have a chaperone listed.

Mailing Address:

MSU Extension, Flathead County
1108 South Main Street Ste. 4
Kalispell, MT 59901

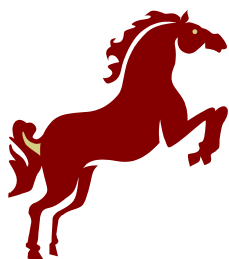
Phone: 406-758-5553

Fax: 406-758-5881

Email: extension@flathead.mt.gov

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Montana State University Extension encourages persons with disabilities to participate in its programs and activities. If you anticipate needing any type of special accommodations or have questions about the physical access provided, please contact Flathead County Extension Office at 758-5553 in advance of your participation or visit.



4-H camp participants are asked to stay with other members in the designated sleeping area unless camp staff is otherwise notified.



We will have a “Free Item Table” for participants to donate/share with others (New or Used). We will also be holding a silent auction during camp filled with fun merchandise that campers or parents/chaperones may be interested in purchasing. For this, please bring only New items. See the schedule of events for details. All proceeds will be used for the 4-H Horse Program.

Things you need to bring with you:

Water Bottle (s)	Sleeping Bag & Pillow
Cot or Air Mattress (strongly recommended)	Toiletries
Medications (must be turned into the camp nurse)	A Towel
Riding clothes and boots (no tennis shoes for riding)	A Notebook/writing utensils
Riding Helmet (unless a waiver has been signed)	4-H Horsemanship Workbooks

*Money to purchase silent auction items or other camp merchandise

***Please use discretion when bringing valuables to horse camp. Please clearly label all valuables.
The Flathead 4-H Foundation is not responsible for lost or stolen items.***

Things your horse needs:

Feed (hay or grain)	Water Buckets
Grooming Tools	Saddle & Tack (show items are not necessary)
Stall Cleaning Items (wheel barrow and forks are optional but strongly encouraged.)	
Additional Shavings if desired.	

Please clearly label all belongings.

Immunizations are recommended but are at the discretion of the horse owner.



Flathead County 4-H Horse Camp

April 29, 30 & May 1, 2016
Flathead County Fairgrounds

**For Office Use Only:**

Date: _____

Amount: _____

Check ☐ Check No. _____ Cash ☐

*Registrations may be turned into
the Extension Office no later than
April 12th, 2016. at 5:00 pm.*

Participant's Name: _____ Age: _____ DOB: _____

Address: _____ City: _____ Zip: _____

Phone: _____ M _____ F _____ 4-H Club: _____

Cell: _____ Email: _____

Horsemanship Projects & Levels Currently Enrolled in: _____

Parents Name: _____ Interested in being Overnight Chaperone? Y _____ N _____
Circle One

Each child is required to have an adult chaperone during clinic hours, (Friday 4:00pm -9:30pm, Saturday 8:30am-9:00pm, & Sunday 8:30am-4:00pm). An adult may chaperone up to 5 members. Chaperones are required to pay \$35.00 for meal expense and are welcome to attend all meals provided. Chaperone fees also include a free camp t-shirt. Chaperones must fill out a separate registration form. Guests, siblings and non-chaperone parents who will be joining us for meals must pay \$5 per meal in advance.

Name of Chaperone: _____ Phone: _____

if not the same as listed above.

☐ Please check if you are interested in becoming a Mentor at Horse Camp. Mentors must have Horse Camp experience, horse knowledge, and leadership skills. Mentors will be responsible for organizing games on Friday evening, organizing and facilitating the dance on Saturday night, and assisting Jr. members. Mentors will need to be outgoing and welcoming to all members making Horse Camp an outstanding experience for all campers. If selected as a Sr. Mentor a credit to your Horse Camp registration of \$40 will be applied.

Fees: *Partial scholarships in the amount of \$30 for registration fees may be available upon written request.*

Member Early Bird Registration Fee by April 4th- \$62.00 or \$87 non-members _____

Member Registration Fee by April 19th- \$72.00 or \$97 non-members _____

Multi-Household member discount - Yes or No Amount (_____) _____

Stall Fee- \$8.00 (includes 1 bag shavings). Extra bags \$5.00 _____

Extra Stall- \$8.00/stall # of Stalls _____ X \$8.00= _____

\$5.00 of stall fees are refundable at the end of camp if clean or may be donated back to Horse Camp

Guest Meals: (\$5 per meal per guest)

Friday Dinner: _____ (# of Guests)

Saturday: Breakfast _____ Lunch _____ Dinner _____

Sunday: Breakfast _____ Snack _____ Dinner _____

Clothing available in youth and adult sizes: XS, S, M, L, XL, & XXL

T-Shirt- (1st is Free, additional \$10 each) Size: _____ Quantity: _____ Youth: _____ Adult: _____

Size: _____ Quantity: _____ Youth: _____ Adult: _____
*(additional camp merchandise including baseball caps and pullover jackets will be available at camp)***Please make checks payable to the Flathead 4-H Horse Committee: Total:** _____**OVER** _____



CODE OF CONDUCT FOR 4-H MEMBERS



1. I will conduct myself at all times in order to be a credit to the club, school and community.
2. I will dress neatly and appropriately for the occasion.
3. I will show respect for the rights of others to be courteous at all times.
4. I will be honest and not take unfair advantage of others.
5. I will respect the property of others.
6. I will refrain from loud boisterous talk, swearing and other inappropriate behavior.
7. I will demonstrate sportsmanship in the contests and meeting, modesty in winning and generosity in defeat.
8. I will attend sessions promptly and respect the opinion of others in discussion.
9. I will not be under the influence of or in possession of any drugs, alcohol, or tobacco products.
10. I will care for the fairground property and respect the rights of other guests of horse camp.
11. I will take proper care of and provide safe, humane treatment of my animal at all times.
12. I will be in my sleeping area and stay there after curfew time and I will be dressed and ready for each day by the set time given by the chaperone (s).
13. I will be prepared to report to my club and other clubs knowledge gained by attending these activities.
14. I will accept the authority of the chaperone (s) and advisors in charge of horse camp.

I have read the above Code of Conduct and understand that my infraction of any of the above rules will be cause for my participation in horse camp to be terminated and for me and my horse (s) to be sent home at my own expense.

Signature of 4-H Member _____ Date _____

Parent or Guardian's Signature _____ Date _____

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Medical Release Form for 4-H Members



Name: _____

Address: _____

Name of Parent or Legal Guardian: _____

Physician: _____ Phone: _____

Dentist: _____ Phone: _____

In Case of Emergency Contact: _____

Phone: _____ Address: _____

Alternate Contact if Emergency: _____

Phone: _____ Address: _____

Date of Last Tetanus Shot _____

Answer the following questions either yes or no. Any yes answers require an explanation.

1. Respiratory problems: Yes _____ No _____

Explain _____

2. Heart Disease: Yes _____ No _____

Explain _____

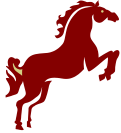
3. Stomach or intestinal problems: Yes _____ No _____

Explain _____

4. Diabetes or hypoglycemia (low blood sugar): Yes _____ No _____

Explain _____

OVER —————>



Medical Release Form for 4-H Member Continued



5. Nervous disorder (convulsions, epilepsy, dizziness, etc.) Yes_____ No_____
- Explain_____
6. Any Allergies Other Than Food: Yes_____ No_____
- Explain_____
7. Any Food Allergies: Yes_____ No_____
- Explain_____
8. Are you currently under a doctor's care? Yes_____ No_____
- Explain_____
9. Are you currently taking medications? Yes_____ No_____
- Explain_____
10. Any physical restrictions or other medical problems that may require consideration?
- Yes_____ No_____ Explain_____
- _____
11. Any special diet or food restrictions? Yes_____ No_____
- Explain_____

I, _____ do hereby give permission to _____

to seek and obtain any medical care necessary for my child, _____

during my absence.

SIGNATURE OF PARENT OR GUARDIAN: _____

Date: _____

Name of Insurance Carrier: _____

Insurance Policy # _____

Media Release Form

Montana State University Extension

Name of participant _____ County Flathead County

Name of event or activity 2016 Flathead County Horse Camp

Date and Location of event or activity Flathead County Fairgrounds, Friday April 29, Saturday, April 30, & Sunday May 1, 2016

The **MSU Extension Service—4-H** may like to use photos or video of your child that was taken during the above event or activity to use in a press release and other publicity related to this event. The photo or film may be used for the following purposes:

- Website
- Press Release
- News Story
- Marketing materials
- Other

Do you authorize the use of photos or video of your child at this event or activity?

YES

☐

NO

☐

I consent and agree, individually and, as a parent or guardian of the minor named above, to the foregoing terms and provisions. By signing below, I hereby waive any right that I (and a minor) may have to inspect or approve the copy and/or finished product or products that may be used in connection therewith or the use to which it may be applied. I warrant that I am of full legal age and have every right to contract for the minor in the above regard. I have also read and understand the conditions of use listed below.

Parent or Guardian Signature _____ **Date** _____

CONDITIONS OF USE:

1. We will not use personal details or full names (first name and last name) of any child in a photograph on our web site.
2. We will not include personal e-mail or postal addresses, telephone or fax numbers on our web site or in other printed publications.
3. We may use the name of the child in accompanying text or a photo caption.
4. We may use group or photographs with very general labels.
5. We will only use images of children in suitable dress, to reduce the risk of inappropriate use of images.



**MONTANA
STATE UNIVERSITY**

EXTENSION



**Montana 4-H Center
FOR YOUTH DEVELOPMENT**

The Montana State University Extension Service is an ADA/EO/AA/Veteran's Preference Employer and Provider of Educational Outreach.